

BOARD OF TRUSTEES

Diversity Equity and Inclusion (DEI) Committee

Friday, March 22, 2024
11:30 A.M.

BOARD ROOM
4800 Fournace Place, Bellaire, Texas 77401

The meeting may be viewed online at: <http://harrishealthtx.swagit.com/live>.

Notice: Some Board Members may participate by videoconference.

Mission

Harris Health is a community-focused academic healthcare system dedicated to improving the health of those most in need in Harris County through quality care delivery, coordination of care, and education.

AGENDA

- | | | |
|--|--------------------|--------|
| I. Call to Order and Record of Attendance | Ms. Marcia Johnson | 2 min |
| II. Approval of the Minutes of Previous Meeting | Ms. Marcia Johnson | 2 min |
| • DEI Committee Meeting – February 16, 2024 | | |
| III. Standing Monthly Report(s) | Ms. Marcia Johnson | 10 min |
| A. Update Regarding Harris Health’s Minority and/Woman-owned Business Enterprises (M/WBE) Program – Mr. Derek Holmes | | |
| IV. New Business | Ms. Marcia Johnson | 45 min |
| A. Presentation Regarding Community Health Workers: Home Visits – Dr. Esperanza “Hope” Galvan | | |
| V. Adjournment | Ms. Marcia Johnson | 1 min |

HARRIS HEALTH SYSTEM
MINUTES OF THE BOARD OF TRUSTEES
DIVERSITY EQUITY AND INCLUSION COMMITTEE MEETING
Friday, February 16, 2024
11:30 AM

AGENDA ITEM	DISCUSSION	ACTION/RECOMMENDATIONS
I. Call to Order and Record of Attendance	<p>Ms. Marcia Johnson, Chair, called the meeting to order at 11:33 a.m. It was noted there was a quorum present and the attendance was recorded. Ms. Johnson announced that while some Board members are in the room, others will participate by videoconference as permissible by state law and the Harris Health Videoconferencing Policy. Only participants scheduled to speak have been provided dial in information for the meeting. All others who wish to view the meeting may access the meeting online through the Harris Health website: http://harrishealthtx.swagit.com/live.</p>	
II. Approval of the Minutes of the Previous Meeting – DEI Committee Meeting – January 12, 2024		Moved by Ms. Jennifer Tijerina, seconded by Ms. Marcia Johnson, and unanimously approved the minutes of the January 12, 2024 meeting. Motion carried.
III. Standing Monthly Reports		
A. Update Regarding Harris Health’s Minority/Women Owned Business Enterprises (MWBE)	<p>Mr. Derek Holmes, Administrative Director, Contracting Diversity, delivered an update regarding Harris Health’s Minority and Women–Owned Business Enterprises (MWBE). The Contract Diversity Program highlights include:</p> <ul style="list-style-type: none"> • 25.87% MWBE Awards YTD (OCT23 - JAN24) • FY23 Annual Report distributed on February 2, 2024 • Purchasing Agenda Items updates <p>A copy of the executive summary is available in the permanent record.</p>	As Presented.

AGENDA ITEM	DISCUSSION	ACTION/RECOMMENDATIONS
<p>B. Update Regarding Harris Health’s Food Farmacy Program</p>	<p>Ms. Denise LaRue, Director of Care Integration and Transformation Community Integration, Population Health, delivered an update regarding Harris Health’s Food Farmacy Program. The Food Farmacy Program expansion highlights include:</p> <ol style="list-style-type: none"> 1) MLK Health Center <ul style="list-style-type: none"> • Awaiting feedback from construction contractor, followed by Board approval • Estimated completion: December 2024 2) Settegast Health Center <ul style="list-style-type: none"> • Currently advertising bids and should have them by next month • Estimated completion: September / October 2024 3) Gulfgate & El Franco Lee Health Centers <ul style="list-style-type: none"> • The program is working to combine the contract, meaning same construction contractor for both sites • Estimated completion: September 2024 <p>A copy of the executive summary is available in the permanent record.</p>	<p>As Presented.</p>
<p>IV. New Business</p>		
<p>A. Presentation Regarding Diversity, Equity and Inclusion (DEI) Employee Engagement Data Analysis</p>	<p>Mr. Thomas Alexander, Senior Human Resources Program Manager, Diversity, Equity, and Inclusion, delivered a presentation regarding Diversity, Equity, and Inclusion (DEI) Employee Engagement Data Analysis. Mr. Alexander stated that the purpose of a DEI analysis (deep dive) is to gain valuable insight into variables that may contribute to the state of DEI within the organization. He noted that a DEI data analysis aids in identifying areas of opportunity to foster an inclusive and equitable environment. Dr. Jobi Martinez, Chief Diversity Officer, touched upon benchmarking, 2023 themes, and areas of interest such as authenticity, inclusion, and conflict resolution. Mr. Alexander provided an overview of the employee engagement survey response rate by demographic make-up such as ethnicity, tenure, gender, employment status, and job family. Mr. Alexander shared employee comments and additional findings regarding inclusion, human – respect – culture, and engagement. Dr. Martinez addressed continued engagement opportunities, additional education and resources, action plans, and partnerships centered around the employee engagement survey. A copy of the presentation is available in the permanent record.</p>	<p>As Presented.</p>

AGENDA ITEM	DISCUSSION	ACTION/RECOMMENDATIONS
V. Adjournment	There being no further business, the meeting adjourned at 12:35 p.m.	Moved by Ms. Jennifer Tijerina, seconded by Ms. Marcia Johnson, and unanimously approved to adjourn the meeting.

I certify that the foregoing are the Minutes of the Meeting of the Diversity Equity and Inclusion Committee of the Board of Trustees of the Harris Health System held on February 16, 2024.

Respectfully submitted,

Ms. Marcia Johnson, JD, Chair

Recorded by Cherry A. Pierson, MBA

Friday, February 16, 2024

Harris Health System Board of Trustees Board Meeting – Diversity, Equity & Inclusion (DEI) Committee Attendance

Note: For Zoom meeting attendance, if you joined as a group and would like to be counted as present, please submit an email to: BoardofTrustees@harrishealth.org before close of business the day of the meeting.

DEI COMMITTEE MEMBERS PRESENT	DEI COMMITTEE MEMBERS ABSENT	ADDITIONAL BOARD MEMBERS PRESENT
Ms. Marcia Johnson <i>(Committee Chair)</i>	Dr. Andrea Caracostis <i>(Ex-officio)</i>	
Dr. Cody M. Pyke		
Ms. Jennifer Tijerina		


HARRIS HEALTH EXECUTIVE LEADERSHIP, STAFF & SPECIAL INVITED GUESTS	
Anthony Williams	John Matcek
Antoinette “Toni” Cotton	Lindsey “Katie” Rutherford <i>(Harris County Attorney’s Office)</i>
Cherry Pierson	Louis Smith
Denise LaRue	Maria Cowles
Derek Holmes	Maureen Padilla
Ebon Swofford <i>(Harris County Attorney’s Office)</i>	Michael Hill
Dr. Esmail Porsa <i>(Harris Health President & CEO)</i>	Nicholas J. Bell
Dr. Glorimar Medina	Olga Rodriguez
Haley Love	Omar Reid
Dr. Jackie Brock	Patricia Darnauer
Jeffrey Baffour	Sara Thomas <i>(Harris County Attorney’s Office)</i>
Dr. Jennifer Small	Shawn DeCosta
Jennifer Zarate	Dr. Steven Brass
Jerry Summers	Tai Nguyen
Dr. Jobi Martinez	Thomas Alexander

Friday, March 22, 2024

Update Regarding Harris Health's Minority and/Woman-owned Business Enterprises
(M/WBE) Program

M/WBE Program Updates:

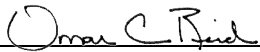
- 2024 has primarily focused on community outreach and the completion of the annual report which will be presented to the DEI Board Committee in April.
- The Harris Health Program joined the Interagency Mentor Protege Program that includes partners such as the City of Houston, Metro, Port Houston, HISD, HCC, and others.
 - Website description:
 - The City of Houston, Metropolitan Transit Authority of Harris County, Houston Independent School District, Port Houston, Houston Community College, and Harris Health System has teamed together for the Interagency Mentor Protégé Program (IMPP). IMPP exists to strengthen effective working relationships and fosters long term stability between established companies and local agencies with emerging historically underutilized businesses. The goals of IMPP are to enhance the business skills and broaden the base of historically underutilized businesses by providing the knowledge and experience of established firms.
 - Benefits for participating in IMPP include but not limited to:
 - Understanding your business financials and bidding
 - Create and strengthen working relationships between established and emerging companies
 - Understanding of how to do business with local government agencies
 - Technical Assistance in specific areas for protégés
- The M/WBE Program is currently surveying M/WBE vendors to identify areas of opportunity.
- The M/WBE Program continues its "Coffee and Conversations" virtual workshop series.



Omar C. Reid, MBA, IPMA, CP
Executive Vice President & Chief People Officer

Friday, March 22, 2024

Presentation Regarding Community Health Workers: Home Visits



Omar C. Reid, MBA, IPMA, CP
Executive Vice President & Chief People Officer

HARRISHEALTH SYSTEM



Community Health Worker Home Visit Program

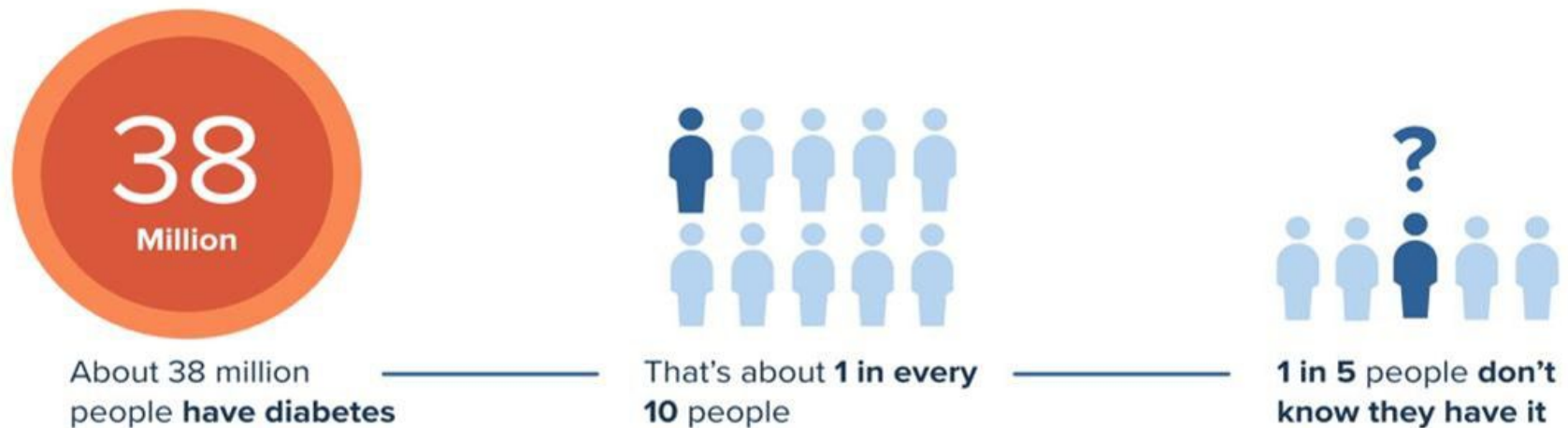
Esperanza (Hope) Galvan PhD, MS, RN-BC
Population Health Transformation

Health Equity Strategic Playbook

Below standards are aligned with and validated by leading national accreditation authorities on the role of healthcare systems in advancing health equity:

1. Ensure equity is a strategic priority for the healthcare system by (a) developing a **health equity strategic plan** and (b) **embedding standing structures** to resource and support health equity work
2. Document valid and reliable **patient demographic data** (REGAL – race, ethnicity, gender, age, language) using EHR technology
3. Stratify key process and outcome metrics within **specific focus areas** by REGAL variables to identify equity gaps
4. Develop a written action plan for addressing at least one of the healthcare disparities identified within a specific population of focus, with a process to monitor and report progress
5. Implement a plan for **addressing the role of HRSN** in driving health disparities, including (a) documenting patient SDOH needs and (b) implementing responsive interventions with community partners
6. Ensure the organization's **internal culture** supports health equity by providing staff training and reviewing recruitment and hiring practices

Diabetes: A Critical Public Health Concern



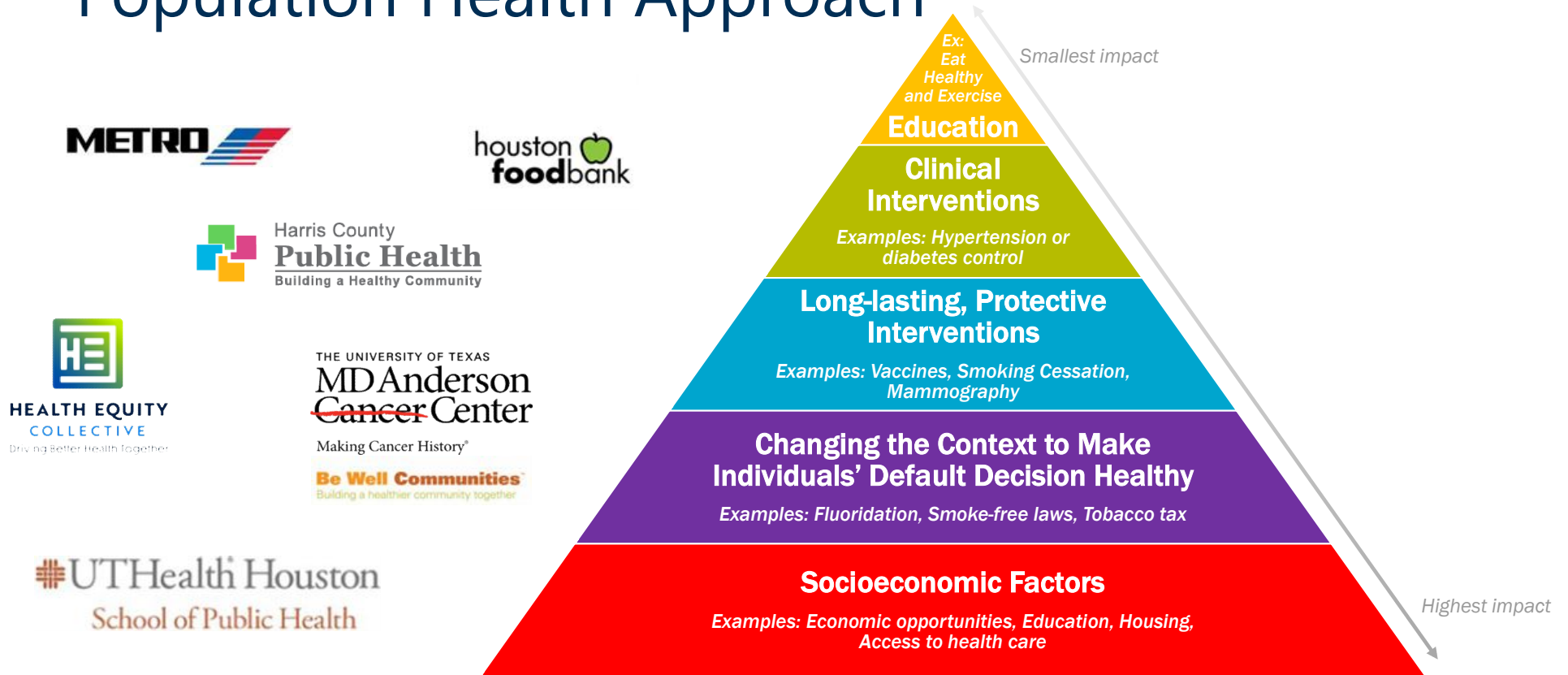
- Eighth leading cause of death in the United States
- Increased risk for acute and chronic complications including cardiovascular, kidney, eye and nerve disease

Harris Health Interventions for Diabetes Care

Depending on need, diabetes patients qualify for a range of interventions at Harris Health today:

PRE-DIABETES STANDARD OF PRACTICE	CLINICAL PHARMACY & TRIPLE THERAPY	DIABETES SELF-MANAGEMENT EDUCATION	CHRONIC DISEASE MANAGEMENT	COMMUNITY HEALTH WORKER HOME VISITS	FOOD FARMACY & CULINARY MEDICINE
<ul style="list-style-type: none"> Systematic identification of risk-stratified patients to connect with lifestyle modification resources, prescriptions, and the 12-month county diabetes prevention program (DPP) 	<ul style="list-style-type: none"> Clinical pharmacy care team Optimization of medication therapy by non-insulin agents for long-term control 	<ul style="list-style-type: none"> Certified Diabetes Educators empower patients to learn self-management skills for long-term adaptation and coping Serve inpatient units, emergency centers, ambulatory clinics, and select specialty locations 	<ul style="list-style-type: none"> Strategic care coordination focused on highest risk diabetes patients Demonstrated improved A1c control and eye exam completion Pre-visit planning provided by nursing 	<ul style="list-style-type: none"> Community Health Workers support patients with uncontrolled diabetes who are disengaged from care through home and telehealth visits to develop a customized care plan 	<ul style="list-style-type: none"> Provides 30 lbs of fresh food biweekly, skills-based nutrition training, and benefits enrollment assistance to food insecure patients with uncontrolled diabetes

Population Health Approach



Frieden TR. [A Framework for Public Health Action: The Health Impact Pyramid](#). Am J Public Health 2010;100:590-595.

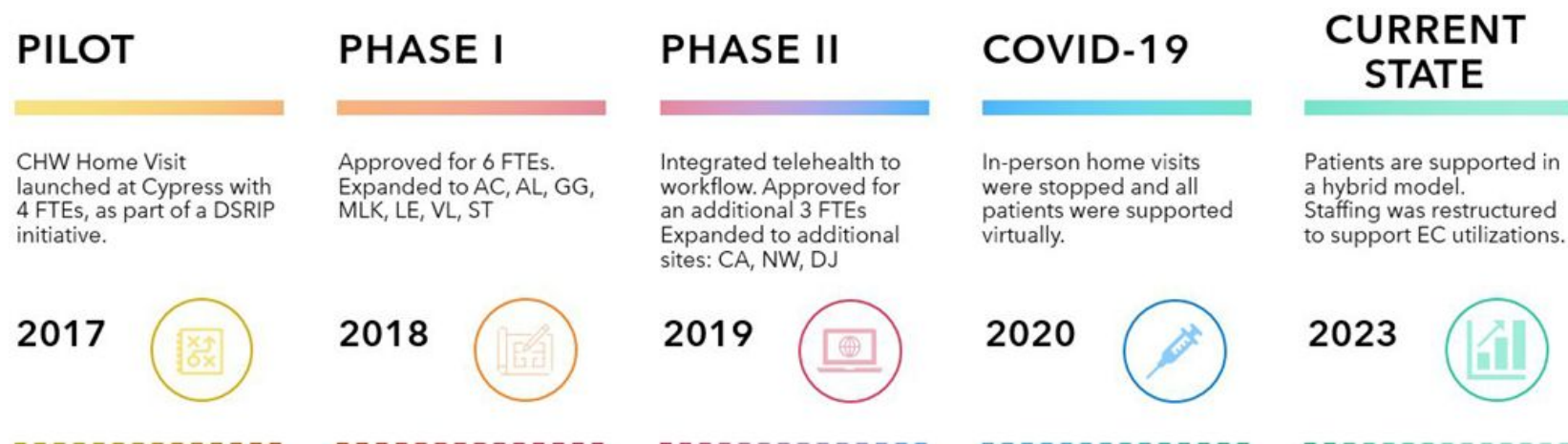
Multipronged Approach: Community Health Workers



Community Health Worker Home Visit

Background:

CHW Home Visit initiated its pilot program in 2017 to support the A1-115 DSRIP initiative. Following its successful implementation in Cypress, the program swiftly expanded to encompass multiple sites. Distinguished as pioneers, the CHW Home Visit Team proactively screened all patients for health related social needs and were the first to foster telehealth visits involving clinical providers such as Patient Education and Dieticians, alongside their patients. Notably, in 2022, CHW Home Visit received recognition from America’s Essential Hospitals, being honored with the Gage Award in Population Health.



Responding to the Need

Community Health Workers (CHWs) conduct home and virtual visits with Harris Health patients with uncontrolled diabetes who utilize the emergency department, to meet patients where they are and help **overcome barriers to care**.

Drivers of ED Utilization by Harris Health patients:



Financial issues
including coverage



Unmet basic
needs



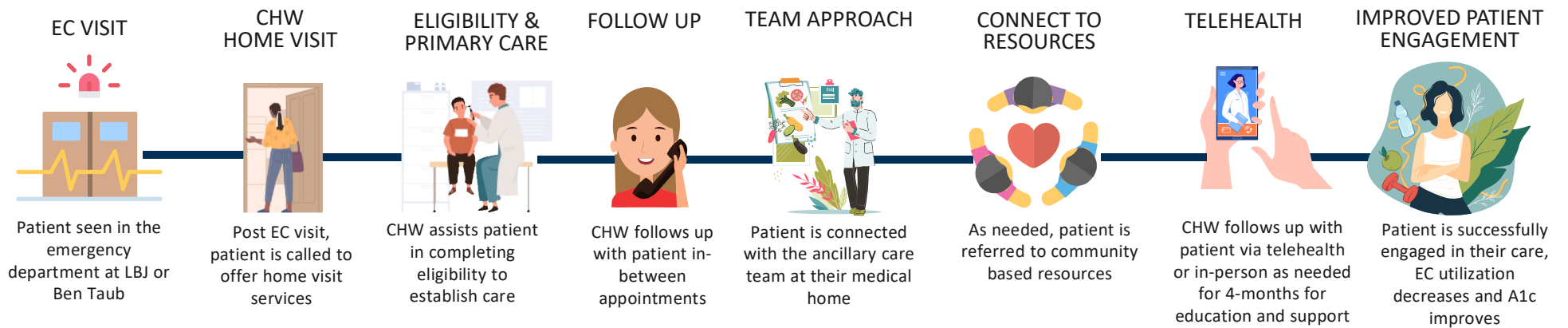
Self perceived
severity of condition



Convenience – one
stop shop

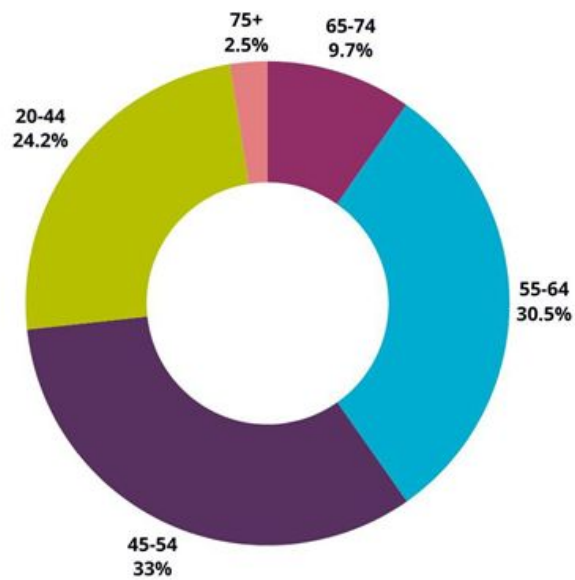
Patient Journey

Meeting the patient where THEY are, is key to eliciting change



Who We Serve

AGE

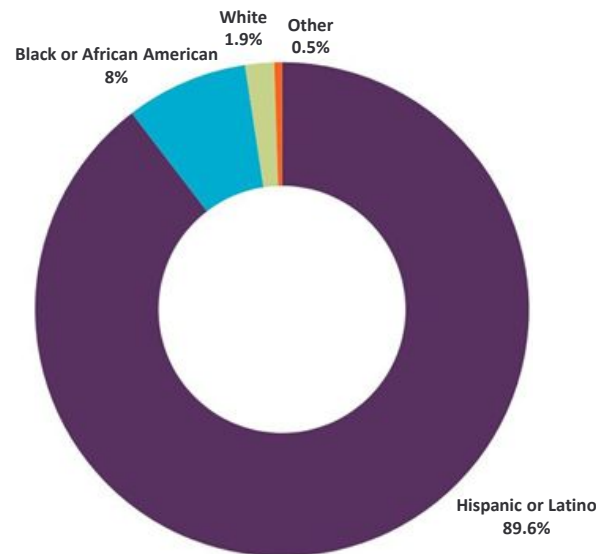


64.2%
Woman



35.8%
Man

RACE



77%
Spanish



23%
English

Primary Care Engagement Increases

Shifting from acute care → primary care

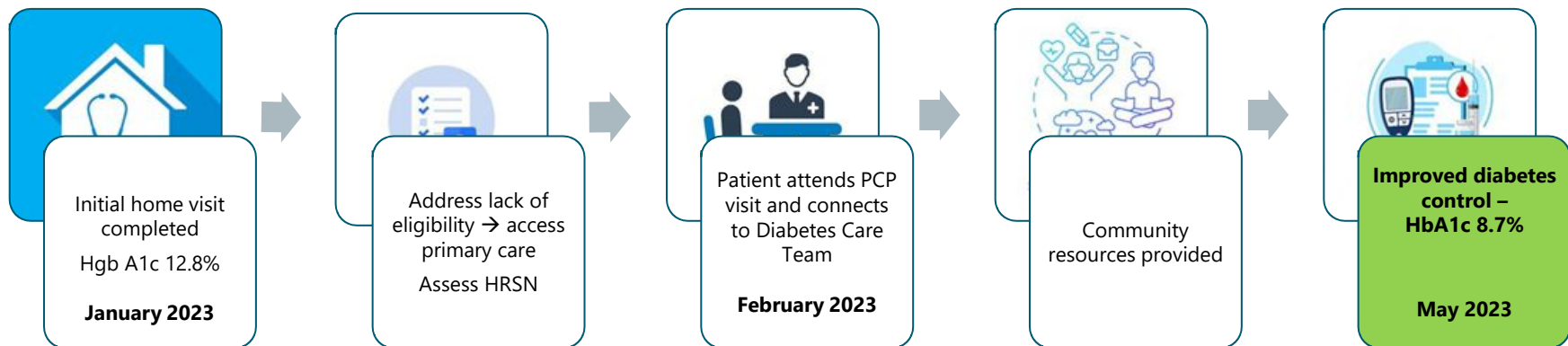
Enrolled Year	2021	2022	2023
% Change in completed Office Visits per 1000	↑76.5%	↑76.5%	↑55.0%

NOTE: The percent change results are based on comparing rates 12 months post-discharge to rates 12 months pre-enrollment. The 2023 results are based on discharges through June 2023; with 6-month post-discharge results extrapolated to 12 month estimates.

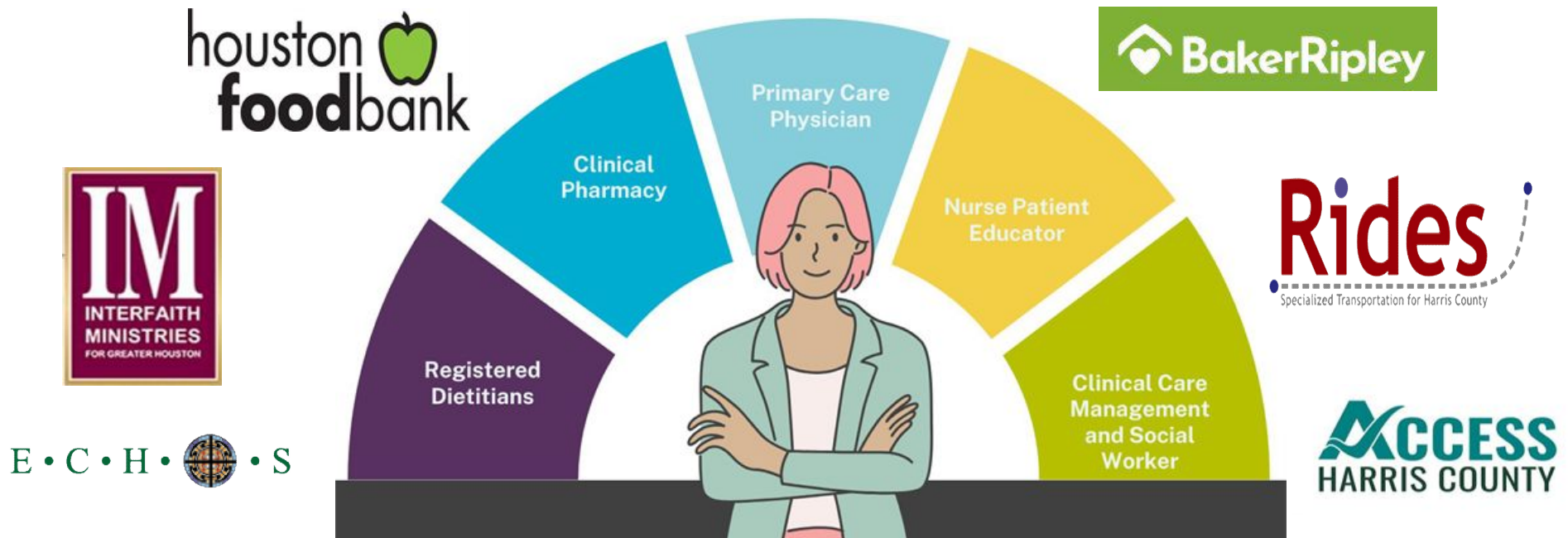
Meet Mrs. J

56 year old female with uncontrolled type II diabetes, recent visit to the emergency department for vision issues

- Prior to emergency department visit, last health care encounter was in 2002
- Patient was not taking any medications
- **Primary barrier identified:** lack of coverage → access to care



It Takes a Village - Key Collaborations



The CHW Home Visit Program connects patients to different diabetes care team members, allowing for comprehensive and coordinated care. Regular interactions and collaboration within the team ensure that the patient's goals and concerns are addressed holistically, promoting better health and patient experience.

Future Considerations

- Assess impact of HB 1575: allows **community health workers** to be reimbursed by Medicaid for their work to address **non-medical health needs** through the state's Case Management for Children and Pregnant Women program
- Consider expanding reach to include patients with any **chronic medical condition**, not just Diabetes